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			nave	1.5 own ceruncate	of ingn	ing or transmission.			
ONE EMBARCA SUITE 562	7590 1000R YNCH, PATENT ADERO CENTER	ATTORNEY	OIPE I her State address trans	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (371) 273-2885, on the date indicated below.					
SAN FRANCIS	CO, CA 94111	(1/	AN 0 2 2009	Ruth Der			(Depositor's name)		
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		(A)	STADENAND OF	Tanuary	2	2009	(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTOR	NEY DOCKET NO.	CONFIRMATION NO.		
525ر99/981	09/981.525 10/16/2001			Fred-Burbank			8046		
TITLE OF INVENTION	. TISSUE ACQUISITIO	N SYSTEM AND METH	HOD OF USE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEB	TOTAL FEE(S) DUE	DATE DUE		
nenprovisional	YES	\$7 <i>5</i> 5	\$300	\$0		\$1055	01/08/2009		
EXAM	INER	ART UNIT	CLASS-SUBCLASS						
FOREMAN, JO	M MAIITANC	3736	600-567000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							10 504358 09981525 9		
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)					·				
SenoRx,	Inc.		Irvine, (Californi	ia				
Please check the appropr	iate assignee category or	r categories (will not be pr	rinted on the patent):	Individual 🛣 C	orponitio	m or other private grou	up entity Government		
4a. The fellowing fee(s) are submitted: **Elements**			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4358 (enclose an extra copy of this form).						
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).									
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Authorized Signature	- Edward	(John		Date	ano	2, 2005			
Typed or printed nam	<u>Edward</u>	Lynch		Registration 1	No2.	4,422			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.									

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FACSIMILE

To:	Mail Stop ISSUE FEE
Company:	Commissioner for Patents
Fax:	571 273 2885
From:	Ruth Der, Paralegal
Telephone:	415 646 8029
Fax:	415 646.8035
Date:	January 2, 2009
Re:	Serial No. 09/981,525; Atty. Docket No. SENOP-00401
Pages: (including coversheet)	3
Message:	Attached is Part B- Fee(s) Transmittal in duplicate.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of Burbank et al.			Examiner: Jonathan M. Foreman Group Art Unit: 3736		
For:	TISSUE ACQUISITION SYSTEM AND METHOD OF USE)	Customer No.: 061808		
Serial	No.: 09/981,525) ,)	TRANSMITTAL		
Filed:	October 16, 2001)			
Docke	et No.: SENOP-00401)			

CERTIFICATE OF TRANSMISSION PURSUANT TO 37 C.F.R. 1.8

I hereby certify that this these papers are being sent by facsimile to (571) 273-2885, and addressed to Mail Stop Issue Fee, Commissioner for Patents. P.O. Box 1450. Alexandria, VA 22313-1450, on January 2, 2009. in San Francisco, CA.

ву:____

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

- 1. Transmitted herewith for filing in the above-identified patent application are the following:
 - X Part B Fee(s) Transmittal in duplicate.
- 2. Fees due
 - _X_ Issue fee, \$755.
 - X Publication fee, \$300.
- 3. Payment of fees
 - X The Commissioner is authorized to charge the fees due, the deficiency in payment and/or to credit any overpayment which may be required under 37 CFR §1.16 and §1.17 to Deposit Account. No. 50-4358, referencing Atty. Docket No. SENOP-00401.

Respectfully submitted,

Edward J. Lyngh Registration No. 24,422 Attorney for Applicants

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